

IN THE District Court of the United States
For the Middle District of Alabama
Southern Division

2008 JAN 25 A 9:53

U.S. DISTRICT COURT
MIDDLE DISTRICT ALA

JASON PAUL DAVIS 172082

Plaintiff

- V -

LYNN DAVIS

Defendant

Civil Action NO-1:07-CV-970-WKW
[WO]

Objections to dismissal of Case

I Jason Davis object to dismissal of Case
on the grounds that Lynn Davis violated
the tort law and the Americans with
Disabilities Act.

the Case Action Summary, Letter from
Probation and Parole office and
Mental Health Service record and
Hospital Doctors report will prove.

On 11-7-06 my Probation was Modified
and I was to go to a HALF-way house
Lynn Davis was to find a HALFway house
Lynn Davis told me she had called
Probation officer. On 12-1-06 My Probation
was revoked Before I Left the County Jail

it was said for A Mental evaluation
the Mental Health Service record will
Show I was never toke to the Mental Health

On 9-18-07 I spoke with the Probation officer
he said he had me evaluated for Lynn Davis.

While my stay in County Jail I caught Staph
infection and had to be operated on my
leg.

Now I am in Mental Health Prison

Done this day 22 of January 2008

Respectfully Submitted

Jason Davis 172082

ACRO370 ALABAMA JUDICIAL INFORMATION SYSTEM CASE: CC 2001 000290.70
 OPER: ROP CASE ACTION SUMMARY
 PAGE: 2 CIRCUIT CRIMINAL RUN DATE: 04/11/2007
 =====
 IN THE CIRCUIT COURT OF COVINGTON JUDGE: MAM

STATE OF ALABAMA

VS

DAVIS JASON PAUL
331 SMITH AVE

CASE: CC 2001 000290.70

ELBA, AL 36323 0000

DOB: 04/10/1974 SEX: M RACE: W HT: 6 00 WT: 155 HR: BRO EYES: HZL
 SSN: 421253783 ALIAS NAMES:

TRANS DATE	ACTIONS, JUDGEMENTS, AND NOTES	OPE
10/04/2006	WITNESS SUBPOENA ISSUED TO W003 STEPHANI KEETON	PAH
10/11/2006	SERVICE OF SERVED PERSON ON 10062006 FOR W002 (A	ANC
10/11/2006	SERVICE OF SERVED PERSON ON 10052006 FOR W001 (A	ANC
10/18/2006	SERVICE OF SERVED PERSON ON 10102006 FOR W003 (A	ANC
11/07/2006	ORDER; DEFENDANT'S PROBATION IS MODIFIED	PAH
11/30/2006	LETTER FROM DEFENDANT - ORDER; DEFT IS TO	PAH
11/30/2006	ADDRESS THIS PROBLEM TO HIS ATTORNEY	PAH
12/01/2006	JUROR FELONY FLAG SET ON FOR INDIVIDUAL (AR10)	PAH
12/01/2006	CHARGE 01 DISPOSED BY: PROB/SANCT ON: 11/07/2006	PAH
12/01/2006	DISPOSITION JUDGE ID CHANGED FROM: TO: MAM	PAH
12/01/2006	CHARGE 01: PROBATION REV/#CNTS: 001 (AR10)	PAH
12/01/2006	ENFORCEMENT STATUS SET TO: "T" (AR10)	PAH
12/01/2006	ORDER; S.O. TRANSPORT DEFT TO DEPT OF MENTAL	ROP
12/01/2006	HEALTH FOR EVALUATION TO BE CONDUCTED	ROP
12/01/2006	EXECUTED: 12-4-06	ROP
01/19/2007	MEMO FROM PROBATION AND PAROLE	ROP
01/19/2007	ORDER; THE ABOVE ACTION IS APPROVED AND THE CLERK	ROP
01/19/2007	OF COURT SHALL THEREFORE FORWARD AN APPROPRIATE	ROP
01/19/2007	TRANSCRIPT OF RECORD TO THE ALABAMA DEPARTMENT OF	ROP
01/19/2007	CORRECTIONS	ROP
04/04/2007	CASE ACTION SUMMARY PRINTED (AR08)	ROP
04/11/2007	CASE ACTION SUMMARY PRINTED (AR08)	ROP



STATE OF ALABAMA
BOARD OF PARDONS AND PAROLES
PROBATION AND PAROLE OFFICE

Room 203
Covington County Court House
Andalusia, AL 36420



November 7, 2006

JASON PAUL DAVIS
COVINGTON COUNTY JAIL

Dear Mr. Davis,

The Court has ordered that you enter a Transaction Center (half-way house) and stay there for eighteen months. You are to remain in the Covington County Jail, until you gain entry. This means that you have been reinstated on probation and are once again under my supervision.

You are required to submit a Monthly Report form, each month, until you complete the eighteen months. I am enclosing several Monthly Report Forms for you to use. While You are in the Covington County Jail, fill one out, place it in an envelope, and mark on the front, "Bill Law, Probation Office, Hand Mail". One of the Corrections Officers will insure that it gets to me. While in the transaction Center, mail one to me, the address is in the upper left hand section of the form.

Upon arrival at the Transaction Center, you will sign a waiver form to allow the Center to keep me advised of your monthly progress. Once you complete the eighteen months, you will report immediately into my office.

If you have any questions, please contact me, otherwise, I wish you every success in your rehabilitation.

Sincerely,

William H. Law
Parole and Probation Supervisor

CC: The File
Encl. Forms

ANDALUSIA REGIONAL HOSPITAL
P.O. BOX 760
ANDALUSIA, AL 36420

Date of Service: 06/09/07
Patient Name: DAVIS, JASON PAUL
Attending Physician: GACSA
MR#: D000046295 ACCT#: D00101808028
DOB: [REDACTED] ROOM#: D.209
SS#: [REDACTED]

OPERATIVE REPORT

DATE OF PROCEDURE: 06/10/2007

PREOPERATIVE DIAGNOSIS

Right anterior thigh cellulitis with abscess.

POSTOPERATIVE DIAGNOSIS

Right anterior thigh cellulitis with abscess and probable infected hematoma.

PROCEDURE

- 1 Incision and drainage, abscess/hematoma.
- 2 Debridement of skin and subcutaneous tissue.

ANESTHESIA

IV sedation plus local.

BLOOD LOSS

10 cc.

SPECIMENS

None.

INDICATIONS

A 33-year-old gentleman with the history as noted above. Plan now is for surgical treatment.

SURGEON

Ashton Wells, MD.

DESCRIPTION OF PROCEDURE

The patient was taken to the operating suite and IV sedation begun. Anterior thigh was prepped and draped in sterile fashion. I used a combination of 1% lidocaine with epinephrine and 0.5% Marcaine for local anesthesia. I noted a previous small stab incision where this abscess has been partially drained in the ER. I created a transverse incision through this and delivered large amounts of old blood and purulent material. This appeared to be most consistent with an infected hematoma. I retracted laterally and superiorly as well as inferiorly and medially through the subcutaneous tissue as much as a subcutaneous hematoma might have to not penetrate the fascia. I sparingly debrided subcutaneous tissue surrounding the wound. I paced the wound loosely with a wet-to-dry dressing. The patient tolerated the procedure well.

Ashton Wells, MD

106846 / 37596 /

Service Record

Name: Davis, Jason P.
 Admission date: 9-22-06 (date will not change during this admission)
 Treatment/Training-Service Plan Update (last) _____
 IDP _____ Start date _____ End date _____
 PAP _____ Ins _____ Medicaid _____

Case Number: 51375
 Date of Intake: 9-29-06
 Pay Status: SML/SED: V
 FS: 065040 045
 Scale I/II: \$ _____ visit/hour

CONSUMER IS COURT COMMITTED TO MI Start Date: _____ End Date: _____

Administrative Reviews:

Date _____ initials _____ Date _____ initials _____ Date _____ initials _____

Date	Corres In/Out	Service	Service Time	Program	Staff Initial	Section	Remarks
9-22-06		CRISIS	1:30	311 HTP	HTM	VIII	9-29-06
9-22-06		Intake	1:30	ADP	Su	VIII	Rel 10/13/06 2:00
10-2-06		Phys	:15	ADP	OS	VIII	Rel. per 2 dr.
10-13-06	WPT (Giles)	Ind.	1:00	ADP	Su	VIII	Rel 11-3-06
10-20-06		TPR	:15	ADP	Su	VIII	Rel approved
10-20-06		Staff			JB		
11-3-06		Rel		ADP	CUA		Rel 11/10/06
11-10-06		Ind	1:00	ADP	CUA	VIII	12-8-06
12-3-06	IN	AIOP	1:00	ADP	CUA	VIII	Phone contact
12-8-06		IND	1:00	ADP	CUA	VIII	RESCH 1-5 @ 2:00
12-18-06		AIOP		SN	UC	8	Failed Appt.
1-4-07	Bill	TPR	:15		CAH		
1-8-07		FA1		ADP	CUA	V	HR
1-13-07		FA2		ADP	CUA	V	Rel 11-13-07
1-19-07		FA2		ADP	CUA	V	Rel 11-19-07
11-24-07		COCK		ADP	CUA	V	Received COCK CONSUMER
11-30-07		COCK		ADP	CUA	V	Rel 11-30-07

DO NOT WRITE BELOW THIS LINE

JASON DAVID 11208Z
PO Box 5707
Union Springs
36089

USA 41

Office of the Clerk
United States District Court
PO Box 711
Montgomery AL
36101

02711